B22C (Official Form 22C) (Chapter 13) (12/10)

In reDEROSIER_ GARRY AND TERESA	According to the calculations required by this statement: ☐ The applicable commitment period is 3 years. ☐ The applicable commitment period is 5 years.
Case number: 13-10011 (If known)	 ☑ Disposable income is determined under § 1325(b)(3). ☑ Disposable income is not determined under § 1325(b)(3). (Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part I.	REPORT O	F INCOME		
	а. 🗌	ital/filing status. Check the box that applies and Unmarried. Complete only Column A ("Debtor Married. Complete both Column A ("Debtor's	r's Income") for L	ines 2-10.		
1	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six month total by six, and enter the result on the appropriate line.					Column B Spouse's Income
2	Gross	s wages, salary, tips, bonuses, overtime, com	missions.		\$3,918.00	\$1,323.00
3	the dif	ne from the operation of a business, profession ference in the appropriate column(s) of Line 3. If you appropriate aggregate numbers and provide details on a continuous tinclude any part of the business expenses of	you operate more t n attachment. Do r	not enter a number less than zero.		
	a.	Gross receipts	\$0	.00		
	b.	Ordinary and necessary business expenses	\$0	.00		
	c. Business income Subtract Line b from Line a				\$0.00	\$0.00
		and other real property income. Subtract Line				
4	part o a. b.	appropriate column(s) of Line 4. Do not enter a nu f the operating expenses entered on Line b as Gross receipts Ordinary and necessary operating expenses Rept and other real property income		Part IV. \$0.00 \$0.00		1 00.00
·	a. b. c.	f the operating expenses entered on Line b as Gross receipts Ordinary and necessary operating expenses Rent and other real property income		Part IV. \$0.00	\$0.00	\$0.00
5	a. b. c.	f the operating expenses entered on Line b as Gross receipts Ordinary and necessary operating expenses		Part IV. \$0.00 \$0.00	\$0.00	\$0.00 \$0.00
·	b. c.	f the operating expenses entered on Line b as Gross receipts Ordinary and necessary operating expenses Rent and other real property income		Part IV. \$0.00 \$0.00		*****
5	part o a. b. c. Intere Pensi Any a exper Do not Each i	f the operating expenses entered on Line b as Gross receipts Ordinary and necessary operating expenses Rent and other real property income st, dividends, and royalties.	s a deduction in a regular basis, fooluding child sunts or amounts pai	Part IV. \$0.00 \$0.00 Subtract Line b from Line a or the household pport paid for that purpose. id by the debtor's spouse.	\$0.00	\$0.00
5	part o a. b. c. Intere Pensi Any a exper Do not Each of do not Unem Howev spous in Column	f the operating expenses entered on Line b as Gross receipts Ordinary and necessary operating expenses Rent and other real property income st, dividends, and royalties. on and retirement income. mounts paid by another person or entity, on a uses the debtor or the debtor's dependents, in t include alimony or separate maintenance payment regular payment should be reported in only one content.	a regular basis, for a regular basis, for a mounts pail blumn; if a paymenthe appropriate colion received by you not list the amount	Part IV. \$0.00 \$0.00 Subtract Line b from Line a or the household pport paid for that purpose. Id by the debtor's spouse. It is listed in Column A, umn(s) of Line 8.	\$0.00 \$1,904.00	\$0.00

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9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a against humanity, or as a victim of international or domestic terrorism.						
		a.					
		b.					
		\$0.00	\$0.00				
10	S th	\$5,822.00	\$1,323.00				
11		otal. If	\$	7,145.00			

	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD				
12					
13	Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.				
•	a. \$0.00				
	b. \$0.00				
	c. \$0.00				
		\$0.00			
14	14 Subtract Line 13 from Line 12 and enter the result.				
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.				
16	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: CALIFORNIA b. Enter debtor's household size: 2				
17	Application of § 1325(b)(4). Check the applicable box and proceed as directed. The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment"				

Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME						
18	18 Enter the amount from Line 11.					
Marital adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.						
	a.	\$0.00				
	b.	\$0.00				
	c. \$0.00					
	-		\$0.00			
20	Current mo	onthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$7,145.00			

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21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.					\$85,740.00		
22	App	licable median family income. Enter the	e amount from L	ine 16				\$61,752.00
23	⊠ TI	Application of § 1325(b)(3). Check the applicable box and proceed as directed. ☑ The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement. ☐ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Parts IV, V, or VI.						
	Di	Part IV. CALCULATIO	ON OF DEI	OUC'	TIONS ALLOWED	FROM IN	ICOME	
		Subpart A: Deductions						
24A	Ente num cour	onal Standards: food, apparel and serv r in Line 24A the "Total" amount from IRS ber of persons. (This information is availab t.) The applicable number of persons is the ral income tax return, plus the number of a	National Standa le at <u>www.usc</u> number that wo	rds for doj.gov ould cu	Allowable Living Expenses //ust/ or from the clerk of the rentrently be allowed as exempted as exempted to the clerk of th	for the applica e bankruptcy		\$1,029.00
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.							
	Но	usehold members under 65 years of ag	je	Нс	usehold members 65 yea	rs of age or o	older	
	a1.	Allowance per member	\$60.00	a2.	Allowance per member		\$144.00	
	b1.	Number of members	2	b2.	Number of members		0	
	c1.	Subtotal	\$120.00	c2.	Subtotal		\$0.00	\$120.00
25A	Hous infor size	al Standards: housing and utilities; non- sing and Utilities Standards; non-mortgage mation is available at www.usdoj.gov/ust/ consists of the number that would currently the number of any additional dependents w	expenses for th or from the clerk y be allowed as	e appl k of the exemp	icable county and family size bankruptcy court). The ap	e. (This plicable family		\$487.00
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.							
	a.	IRS Housing and Utilities Standards; mo				\$2,172.00]
	b.	Average Monthly Payment for any debts home, if any, as stated in Line 47	secured by your			\$2,144.00		
	C.	Net mortgage/rental expense					e b from Line a.	\$28.00
26	Line:	al Standards: housing and utilities; adjusted as 25A and 25B does not accurately compusing and Utilities Standards, enter any addition the basis for your contention in the space	te the allowance tional amount to	to wh	ch you are entitled under th	e IRS		
								\$0.00

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B22C	(Official Form 22C) (Chapter 13) (12/10) - Cont.	4			
27A	bocal Standards: transportation; vehicle operation/public transportation expense. bou are entitled to an expense allowance in this category regardless of whether you pay the expenses of perating a vehicle and regardless of whether you use public transportation. The ence the number of vehicles for which you pay the operating expenses or for which the operating expenses e included as a contribution to your household expenses in Line 7. The ence of the operating expenses or for which the operating expenses e included as a contribution to your household expenses in Line 7. The ence of the operating expenses or for which the operating expenses e included as a contribution to your household expenses in Line 7. The ence of the operating expenses or for which the operating expenses e included as a contribution to your household expenses in Line 7. The ence of the operating expenses or for which the operating expenses e included as a contribution to your household expenses in Line 7. The ence of the expenses of the expenses of the expenses or for which the operating expenses ence of the operating expenses or for which the operating expenses ence of the expenses or for which the operating exp				
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
28	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of vehicles of the word of the least expense. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense for more than two vehicles.) In the proof of the least expense for more than two vehicles. (You may not claim an ownership/lease expense				
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 \$325.00 c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.	\$192.00			
29	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a Line 29. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs \$0.00 b. Average Monthly Payment for any debts secured by				
	Vehicle 2, as stated in Line 47 \$0.00 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.	\$0.00			
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.				
31	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.	\$39.00			
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life, or for any other form of insurance.	\$0.00			
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 49.	\$0.00			
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.	\$0.00			
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.	\$0.00			

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BEEG	Other Necessary Expenses: health care. Enter the total average month	ly amount that you actually expend on health	5			
36	care that is required for the health and welfare of yourself or your dependent paid by a health savings account, and that is in excess of the amount entered Do not include payments for health insurance listed or health savings	\$325.00				
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health that of your dependents. Do not include any amount previously deducted.					
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines	s 24 through 37.	\$4,119.00			
	Subpart B: Additional Living Note: Do not include any expenses that	Expense Deductions you have listed in Lines 24-37				
	Health Insurance, Disability Insurance, and Health Savings Account E the categories set out in lines a-c below that are reasonably necessary for you					
	a. Health Insurance	\$1,114.00	7			
	b. Disability Insurance	\$0.00	7			
	c. Health Savings Account	\$0.00				
39	Total and enter on Line 39		\$1,114.00			
	If you do not actually expend this total amount, state your actual total space below:	al average monthly expenditures in the	41,111.00			
	\$0.00					
40	Continued contributions to the care of household or family members monthly expenses that you will continue to pay for the reasonable and necesselderly, chronically ill, or disabled member of your household or member of yunable to pay for such expenses. Do not include payments listed in Lir	ssary care and support of an your immediate family who is	\$0.00			
41	Protection against family violence. Enter the total average reasonably n actually incur to maintain the safety of your family under the Family Violence other applicable federal law. The nature of these expenses is required to be	Prevention and Services Act or	\$0.00			
42	Home energy costs. Enter the average monthly amount, in excess of the a Local Standards for Housing and Utilities, that you actually expend for home You must provide your case trustee with documentation of your actu you must demonstrate that the additional amount claimed is reasonal	e energy costs. al expenses, and	\$0.00			
43	Education expenses for dependent children under 18. Enter the total actually incur, not to exceed \$147.92 per child, for attendance at a private or by your dependent children less than 18 years of age. You must provide of your actual expenses, and you must explain why the amount claim not already accounted for in the IRS Standards.	public elementary or secondary school e your case trustee with documentation	\$0.00			
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.					
45	Charitable contributions. Enter the amount reasonably necessary for you contributions in the form of cash or financial instruments to a charitable orga § 170(c)(1)-(2). Do not include any amount in excess of 15% of your g	anization as defined in 26 U.S.C.	\$40.00			
46	Total Additional Expense Deductions under § 707(b). Enter the total of	of Lines 39 through 45.	\$1,154.00			
	Subpart C: Deductions for	D.l.4 D				

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	own, lis check schedu	st the name of the creditor, whether the payment included as contractually due to	claims. For each of your debts that is sec, identify the property securing the debt, stades taxes or insurance. The Average Monto each Secured Creditor in the 60 months in list additional entries on a separate page.	ate the Average Monthly hly Payment is the total following the filing of the	Payment, and of all amounts bankruptcy			
		Name of Creditor	Property Securing the Debt	Average Payment	Does payment include taxes or insurance?			
47	a.	Wells Fargo/Wachovia	30397 River Rd., Cloverdale, CA 9542	\$2,144.00	☑ Yes ☐ No			
	b.	Springfield Financial	Utility trailer	\$325.00	☐ Yes ☐ No			
	c.			\$0.00	☐ Yes ☐ No			
	d.			\$0.00	Yes No			
	e.			\$0.00	☐ Yes ☐ No			
				Total: Add Lines a - e		\$2,469.00		
	Other payments on secured claims. If any of the debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.							
48		Name of Creditor	Property Securing the Debt	1/60th of the C	ure Amount			
70	a.			\$0.00				
	b.			\$0.00				
	C.			\$0.00				
	d.			\$0.00		\$0.00		
	e.			\$0.00		·		
	Total: Add Lines a - e							
49	as prio	rity tax, child support and	ity claims. Enter the total amount, divide alimony claims, for which you were liable a ions, such as those set out in Line 33.		•	\$124.00		
		er 13 administrative exp ne resulting administrative	enses. Multiply the amount in Line a by the expense.	ne amount in Line b, and				
	a.	Projected average month	nly Chapter 13 plan payment.	\$275.00				
50	b.	issued by the Executive	or district as determined under schedules Office for United States Trustees. lable at www.usdoj.gov/ust/ or from the court.)	× 0.075				
	C.	Average monthly admini	strative expense of Chapter 13 case	Total: Multiply Lines	s a and b	\$20.630		
51	Total I	Deductions for Debt Pay	ment. Enter the total of Lines 47 through	50.		\$2,613.63		
			Subpart D: Total Deduction	ons from Income		•		
52								

	Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)							
53	otal current monthly income. Enter the amount from Line 20.							
54	upport income. Enter the monthly average of any child support payments, foster care payments, or sability payments for a dependent child, reported in Part I, that you received in accordance with applicable onbankruptcy law, to the extent reasonably necessary to be expended for such child. \$0							
55	Rualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages is contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from setirement plans, as specified in § 362(b)(19).							
56	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.	\$7,886.63						

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	there is below. I You m	tion for special circumstances. If there are special circumstance no reasonable alternative, describe the special circumstances and If necessary, list additional entries on a separate page. Total the expust provide your case trustee with documentation of these explanation of the special circumstances that make such the special circumstances and circumstances are special circumstances.	the resulting expenses in lines a-c penses and enter the total in Line 57. penses and you must provide	
57		Nature of special circumstances	Amount of expense	
	a.		\$0.00	
	b.		\$0.00	
	c.		\$0.00	
			Total: Add Lines a, b, and c	\$0.00
58		djustments to determine disposable income. Add the amounter the result.	s on Lines 54, 55, 56, and 57	\$7,886.63
59	Monthl result.	ly Disposable Income Under § 1325(b)(2). Subtract Line 58 from	m Line 53 and enter the	(\$741.63)
		Part VI: ADDITIONAL EX	KPENSE CLAIMS	
	health a	Expenses. List and describe any monthly expenses, not otherwise and welfare of you and your family and that you contend should be a y income under § 707(b)(2)(A)(ii)(I). If necessary, list additional soul erage monthly expense for each item. Total the expenses.	n additional deduction from your current	
60		Expense Description	Monthly Amount	
00	a.		\$0.00	
	b.		\$0.00	
	c.		\$0.00	
		Total: Add Lines a, b, and c	\$0.00	

Part VII: VERIFICATION					
61	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this a joint case, both debtors must sign.) Date: 1/3/2013 Signature: /s/ Gary L. Derosier (Debtor) Date: 1/3/2013 Signature: /s/ Teresa Derosier (Joint Debtor, if any)				

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